

**DARBY &  
DARBY**

Professional Corporation

**SEATTLE**  
1191 Second Avenue  
Seattle, WA 98101-3404  
Tel: 206.262.8900  
Fax: 206.262.8901**NEW YORK**  
805 Third Avenue  
New York, NY 10022  
Tel: 212.527.7700  
Fax: 212.527.7701**INTELLECTUAL PROPERTY LAW**DATE: June 30, 2005

FILE #:

| FACSIMILE NO. | RECIPIENT AND COMPANY        | CONFIRMATION<br>WILL FOLLOW |
|---------------|------------------------------|-----------------------------|
| 212.527.7701  | Mimi Muscat<br>Darby & Darby | No                          |

FROM: Angela T. Lynch

E-MAIL: alynch@darbylaw.com

PHONE: 206.262.8912

NO. OF PAGES: 22  
(including cover page)

COMMENTS:

**RECEIVED  
OIPE/IAP****JUL 06 2005****PLEASE RETURN TO****\* IF YOU DO NOT RECEIVE ALL PAGES, PLEASE TELEPHONE US IMMEDIATELY AT 206.262.8900**

THE INFORMATION CONTAINED IN THIS FACSIMILE MESSAGE IS INTENDED ONLY FOR THE USE OF THE INDIVIDUAL OR ENTITY NAMED ABOVE. IF THE READER OF THIS MESSAGE IS NOT THE INTENDED RECIPIENT, OR THE EMPLOYEE OR AGENT RESPONSIBLE TO DELIVER IT TO THE INTENDED RECIPIENT, YOU ARE HEREBY NOTIFIED THAT ANY DISSEMINATION, DISTRIBUTION OR COPYING OF THIS COMMUNICATION IS STRICTLY PROHIBITED. IF YOU HAVE RECEIVED THIS COMMUNICATION IN ERROR, PLEASE IMMEDIATELY NOTIFY US BY TELEPHONE SO THAT WE CAN ARRANGE FOR THE RETRIEVAL OF THIS DOCUMENT AT NO COST TO YOU. THANK YOU.

1)

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**DARBY & DARBY PROFESSIONAL CORPORA**  
805 - 3RD AVE.  
NEW YORK, NY 10022-7513

2182

55-7272/212

PAY TO THE ORDER OF Clerk of the Court - US District DATE 6/27/05

Two hundred fifty and no/100 \$ 250.00

DOLLARS

**Washington Mutual**  
Washington Mutual Bank, FA  
Manhattan-87th St. & First Ave. Financial Center 7194  
350 E. 57th Street 1-800-788-7000  
New York, NY 10022 24 hour Customer Service

FOR Symad v. Owens Corning & ATS John V. Bush

⑈00002182⑈ ⑆021272723⑆ 4894458540⑈

**DARBY & DARBY PROFESSIONAL CORPORA**  
805 - 3RD AVE.  
NEW YORK, NY 10022-7513

2184

55-7272/212

PAY TO THE ORDER OF Petty Cash DATE 6/30/05

Three hundred and forty \$ 321.42

DOLLARS

**Washington Mutual**  
Washington Mutual Bank, FA  
Manhattan-87th St. & First Ave. Financial Center 7194  
350 E. 57th Street 1-800-788-7000  
New York, NY 10022 24 hour Customer Service

FOR

⑈00002184⑈ ⑆021272723⑆ 4894458540⑈

PAY TO THE ORDER OF Susan Ziehl DATE 6/28/05 55-7272/212

ONE HUNDRED & EIGHTY-FOUR & 80/100 \$184.80 DOLLARS

FOR Washington Mutual

Washington Mutual Bank, FA  
Washington Mutual Bank, FA  
360 E. 57th Street  
New York, NY 10022  
1-800-768-7000  
24 Hour Customer Service

2183

DARBY & DARBY PROFESSIONAL CORPORA  
805 - 3RD AVE.  
NEW YORK, NY 10022-7513

⑈00002183⑈ ⑆021272723⑆ 4894458540⑈

*[Signature]*

**DARBY &  
DARBY**PROFESSIONAL  
CORPORATION

INTELLECTUAL PROPERTY LAW

SEATTLE

1191 SECOND AVENUE

SEATTLE, WA 98101-3404

TEL 206.262.8900

FAX 206.262.8901

NEW YORK

805 THIRD AVENUE

NEW YORK, NY 10022-7513

TEL 212.527.7700

FAX 212.527.7701

June 28, 2005

Reference: 08228/6002975-000

**JENNIFER K. SIEDENBURG**

LITIGATION PARALEGAL

206.262.8956

jsiedenburg@darbylaw.com

**VIA MESSENGER**

Susan Zielie  
United States District Court  
Western District of Washington  
700 Stewart Street, 17<sup>th</sup> Floor  
Seattle, WA 98101

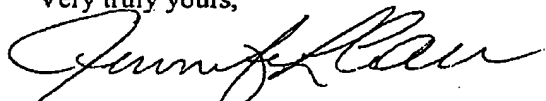
Re: **E-Data v. Corbis Corp., et al.**  
**No. 04-CV-01733-RSL**

Dear Susan:

Enclosed please find our check in the amount of \$184.80 to cover the cost of the transcript of E-Data and Getty Images' Summary Judgment hearing before Judge Lasnik on May 19, 2005.


Thank you for your assistance.

Very truly yours,



Jennifer L. Carr  
Litigation Secretary

JKS:jec  
Enclosure

{S:\08228\6002975000\80031883.DOC  }

**DARBY & DARBY PROFESSIONAL CORPORA**  
805 - 3RD AVE.  
NEW YORK, NY 10022-7513

2185

55-7272/212

PAY TO THE ORDER OF Petty Cash DATE 6/30/05

Three hundred twenty one and 42/100 \$ 321.42

FOR Petty Cash SAF

**Washington Mutual**  
Washington Mutual Bank, F.A.  
360 Lexington Ave.  
New York, NY 10017  
1-800-786-7000  
24 hour Customer Service

DOLLARS ☒

⑈00002185⑈ ⑆1021272723⑆ 4894458540⑈

**PETTY CASH LOG - SEATTLE OFFICE**

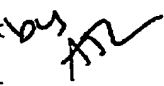
| DATE     | DESCRIPTION                                    | C/M NO            | AMOUNT           | BALANCE  |
|----------|--|-------------------|------------------|----------|
| 06/01/05 | Beginning Balance                              |                   |                  | \$500.00 |
| 06/01/05 | Reimbursement for Nick Szabo's Parking         | Firm              | \$25.00          | \$475.00 |
| 06/01/05 | Postage  | Firm              | \$0.12           | \$474.88 |
| 06/03/05 | Sparkling Water for Happy Hour with David Ream | Firm              | \$14.09          | \$460.79 |
| 06/03/05 | Drinks for Happy Hour with David Ream          | Firm              | \$6.05           | \$454.74 |
| 06/06/05 | Reimbursement for J. Siedenburg's Parking Fee  | 00294/6002918-000 | \$19.00          | \$435.74 |
| 06/07/05 | WSBA Admittance Fee (BEB)                      | Firm              | \$204.00         | \$231.74 |
| 06/09/05 | Birthday Cards for BEB and TDK                 | Firm              | \$5.45           | \$226.29 |
| 06/13/05 | Juice for BEB and TDK's B-Day party            | Firm              | \$9.00           | \$217.29 |
| 06/16/05 | Postage for Esselte Package                    | 06150/8201296-000 | \$14.05          | \$203.24 |
| 06/21/05 | Lunch for Summer Associates                    | Firm              | \$24.66          | \$178.58 |
|          |  |                   |                  |          |
|          |  |                   |                  |          |
|          |  |                   |                  |          |
|          |  |                   | Total Used       | \$321.42 |
|          |  |                   | Amount in Drawer | \$178.58 |
|          |  |                   | Difference       | 0        |
|          |  |                   |                  |          |

{S:\LMC\LOGS\80031600.DOC [REDACTED]}




DARBY &  
DARBY

MEMORANDUM

|      |   |
|------|---|
| TO   | Mimi Muscat/Accounting  |
| FROM | Lori M. Clark  |
| DATE | June 30, 2005   |
| RE   | Checkbook Reconciliation - Patent Account   |

- Log Sheets reflecting a current balance of \$46,059.30
- Copies of checks numbered 1587 - 1589 and back-up documentation

LMC  
Attachments

{S:\LMC\accounting\80028711.DOC  }



1587

**DARBY & DARBY PATENT ACCOUNT**805 3RD AVENUE  
NEW YORK, NY 10022DATE 6/29/05 55-7272-212PAY  
TO THE  
ORDER OF

USPTO

\$ 1400

Fourteen hundred dollars

DOLLARS

Security Features  
Including  
Color & Ink**Washington Mutual**Washington Mutual Bank, PA  
Small Business Banking  
1-800-374-4346  
1180 Avenue of the Americas  
New York, NY 10036

FOR

08211 / 000254-150 Issue Fee

⑈00001587⑈ ⑆021272723⑆ 4894461981⑈

1588

**DARBY & DARBY PATENT ACCOUNT**805 3RD AVENUE  
NEW YORK, NY 10022

DATE

6/21/05

55-7272-212

PAY  
TO THE  
ORDER OF

USPTO

\$ 1,040

One Thousand and forty dollars

DOLLARS

**Washington Mutual**Washington Mutual Bank, FA  
Small Business Banking  
1-800-374-6846  
1180 Avenue of the Americas  
New York, NY 10036

FOR

08211/000799-USD, New Utility App.

MP

⑈00001588⑈ ⑆021272723⑆ 4804461981⑈

PTO/SB/17 (12-04v2)

Approved for use through 7/31/2008. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

|   |               |                          |                          |
|---|---------------|--------------------------|--------------------------|
| Effective on 12/08/2004.<br>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).<br><b>FEE TRANSMITTAL</b><br><b>For FY 2005</b> |               | <b>Complete if Known</b> |                          |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27  |               | Application Number       | Not Yet Assigned         |
|   |               | Filing Date              | Concurrently Herewith    |
|   |               | First Named Inventor     | Stuart B. Shacter        |
|   |               | Examiner Name            | Not Yet Assigned         |
|   |               | Art Unit                 | N/A                      |
| TOTAL AMOUNT OF PAYMENT   | (\$) 1,040.00 | Attorney Docket No.      | 08211/0202774-US0/P06265 |

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~~JUN 30 2005~~

**METHOD OF PAYMENT** (check all that apply)

☒ Check    ☐ Credit Card    ☐ Money Order    ☐ None    ☐ Other (please identify): \_\_\_\_\_

☐ Deposit Account    Deposit Account Number: 04-0100    Deposit Account Name: Darby & Darby P.C.

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below    ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.18 and 1.17    ☒ Credit any overpayments

### FEE CALCULATION

## 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

|                         | FILING FEES     |                 | SEARCH FEES     |                 | EXAMINATION FEES |                 |                       |
|-------------------------|-----------------|-----------------|-----------------|-----------------|------------------|-----------------|-----------------------|
|                         |                 | Small Entity    |                 | Small Entity    |                  | Small Entity    |                       |
| <u>Application Type</u> | <u>Fee (\$)</u> | <u>Fee (\$)</u> | <u>Fee (\$)</u> | <u>Fee (\$)</u> | <u>Fee (\$)</u>  | <u>Fee (\$)</u> | <u>Fees Paid (\$)</u> |
| Utility                 | 300             | 150             | 500             | 250             | 200              | 100             | 1,000.00              |
| Design                  | 200             | 100             | 100             | 50              | 130              | 65              | -                     |
| Plant                   | 200             | 100             | 300             | 150             | 160              | 80              | -                     |
| Reissue                 | 300             | 150             | 500             | 250             | 600              | 300             | -                     |
| Provisional             | 200             | 100             | 0               | 0               | 0                | 0               | -                     |

## 2. EXCESS CLAIM FEES

| <u>Fee Description</u>                             | <u>Fee (\$)</u> | <u>Fee (\$)</u> |
|--|-----------------|-----------------|
| Each claim over 20 (including Reissues)            | 50              | 25              |
| Each independent claim over 3 (including Reissues) | 200             | 100             |
| Multiple dependent claims                          | 360             | 180             |

| <u>Total Claims</u> | <u>Extra Claims</u> | <u>Fee (\$)</u> | <u>Fee Paid (\$)</u> |
|---------------------|---------------------|-----------------|----------------------|
| 20                  | - 20 =              | x               | =                    |

|                      |                     |                 |                      |
|----------------------|---------------------|-----------------|----------------------|
| <u>Indep. Claims</u> | <u>Extra Claims</u> | <u>Fee (\$)</u> | <u>Fee Paid (\$)</u> |
| 3                    | -3 =                | x               | =                    |

### 3. APPLICATION SIZE FEE


If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

| <u>Total Sheets</u> | <u>Extra Sheets</u> | <u>Number of each additional 50 or fraction thereof</u> | <u>Fee (\$)</u> | <u>Fee Paid (\$)</u> |
|---------------------|---------------------|---|-----------------|----------------------|
| 27                  | - 100 =             | /50 (round up to a whole number) x                      | =               |                      |




**4. OTHER FEE(S)**

**Non-English Specification.** \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): 8021 Recording patent assignment

|                   |   |                                      |                                 |
|-------------------|---|--------------------------------------|---------------------------------|
| SUBMITTED BY      |   |                                      |                                 |
| Signature         |  | Registration No.<br>(Attorney/Agent) | 46,717 Telephone (206) 262-8910 |
| Name (Print/Type) | Matthew M. Gaffney  |                                      | Date June 29, 2005              |

{S:\08211\0202774-us0\80031814.DOC [REDACTED]}

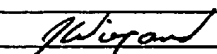
|   |                  |   |
|---|------------------|---|
| <b>DARBY &amp; DARBY PATENT ACCOUNT</b><br>805 3RD AVENUE<br>NEW YORK, NY 10022   |                  | 1589  |
| DATE <u>6-30-05</u>   |                  | 55-7272-212   |
| OF <u>USPTO</u>   | \$ <u>600.00</u> |   |
| <u>Six hundred dollar</u>   |                  | DOLLARS  |
|  <b>Washington Mutual</b><br>Washington Mutual Bank, FA<br>Smart Business Banking<br>1-800-374-4848<br>1100 Avenue of the Americas<br>New York, NY 10036 |                  |   |
| <u>2023/1200335-US3; new app</u>  |                  | <u></u>   |
| ⑈00001589⑈+⑈021272723⑈ 4894461981⑈  |                  |   |

PTO/SB/17 (12-04v2)

Approved for use through 7/31/2006. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

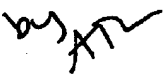
| Effective on 12/08/2004.<br>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).   |              |  |                                | <b>Complete if Known</b>  |                  |                       |                |               |              |  |               |                           |                  |              |        |                                |          |                       |               |                       |          |                       |                |
|---|--------------|--|--------------------------------|---------------------------|------------------|-----------------------|----------------|---------------|--------------|--|---------------|---------------------------|------------------|--------------|--------|--------------------------------|----------|-----------------------|---------------|-----------------------|----------|-----------------------|----------------|
| <h1 style="margin: 0;">FEE TRANSMITTAL</h1> <h2 style="margin: 0;">For FY 2005</h2>   |              |  |                                | Application Number        |                  | Not Yet Assigned      |                |               |              |  |               |                           |                  |              |        |                                |          |                       |               |                       |          |                       |                |
|   |              |  |                                | Filing Date               |                  | Concurrently Herewith |                |               |              |  |               |                           |                  |              |        |                                |          |                       |               |                       |          |                       |                |
|   |              |  |                                | First Named Inventor      |                  | Brian Baker           |                |               |              |  |               |                           |                  |              |        |                                |          |                       |               |                       |          |                       |                |
|   |              |  |                                | Examiner Name             |                  | Not Yet Assigned      |                |               |              |  |               |                           |                  |              |        |                                |          |                       |               |                       |          |                       |                |
|   |              |  |                                | Art Unit                  |                  | N/A                   |                |               |              |  |               |                           |                  |              |        |                                |          |                       |               |                       |          |                       |                |
|   |              |  |                                | Attorney Docket No.       |                  | 08223/1200335-US3     |                |               |              |  |               |                           |                  |              |        |                                |          |                       |               |                       |          |                       |                |
| <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27   |              |  |                                |                           |                  |                       |                |               |              |  |               |                           |                  |              |        |                                |          |                       |               |                       |          |                       |                |
| TOTAL AMOUNT OF PAYMENT   |              | (\$)   |                                | 600.00                    |                  |                       |                |               |              |  |               |                           |                  |              |        |                                |          |                       |               |                       |          |                       |                |
| <b>METHOD OF PAYMENT</b> (check all that apply)   |              |  |                                |                           |                  |                       |                |               |              |  |               |                           |                  |              |        |                                |          |                       |               |                       |          |                       |                |
| <input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____   |              |  |                                |                           |                  |                       |                |               |              |  |               |                           |                  |              |        |                                |          |                       |               |                       |          |                       |                |
| <input type="checkbox"/> Deposit Account            Deposit Account Number: <u>04-0100</u> Deposit Account Name: <u>Darby &amp; Darby P.C.</u>  |              |  |                                |                           |                  |                       |                |               |              |  |               |                           |                  |              |        |                                |          |                       |               |                       |          |                       |                |
| For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)  |              |  |                                |                           |                  |                       |                |               |              |  |               |                           |                  |              |        |                                |          |                       |               |                       |          |                       |                |
| <input type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee  |              |  |                                |                           |                  |                       |                |               |              |  |               |                           |                  |              |        |                                |          |                       |               |                       |          |                       |                |
| <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments   |              |  |                                |                           |                  |                       |                |               |              |  |               |                           |                  |              |        |                                |          |                       |               |                       |          |                       |                |
| <b>FEE CALCULATION</b>  |              |  |                                |                           |                  |                       |                |               |              |  |               |                           |                  |              |        |                                |          |                       |               |                       |          |                       |                |
| <b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b>  |              |  |                                |                           |                  |                       |                |               |              |  |               |                           |                  |              |        |                                |          |                       |               |                       |          |                       |                |
| <table border="0" style="width: 100%;"> <tr> <th colspan="3">FILING FEES</th> <th colspan="2">SEARCH FEES</th> <th colspan="2">EXAMINATION FEES</th> <th></th> </tr> <tr> <th>Application Type</th> <th>Fee (\$)</th> <th>Small Entity Fee (\$)</th> <th>Fee (\$)</th> <th>Small Entity Fee (\$)</th> <th>Fee (\$)</th> <th>Small Entity Fee (\$)</th> <th>Fees Paid (\$)</th> </tr> </table> |              |  |                                |                           |                  |                       |                | FILING FEES   |              |  | SEARCH FEES   |                           | EXAMINATION FEES |              |        | Application Type               | Fee (\$) | Small Entity Fee (\$) | Fee (\$)      | Small Entity Fee (\$) | Fee (\$) | Small Entity Fee (\$) | Fees Paid (\$) |
| FILING FEES   |              |  | SEARCH FEES                    |                           | EXAMINATION FEES |                       |                |               |              |  |               |                           |                  |              |        |                                |          |                       |               |                       |          |                       |                |
| Application Type  | Fee (\$)     | Small Entity Fee (\$)                            | Fee (\$)                       | Small Entity Fee (\$)     | Fee (\$)         | Small Entity Fee (\$) | Fees Paid (\$) |               |              |  |               |                           |                  |              |        |                                |          |                       |               |                       |          |                       |                |
| Utility   | 300          | 150  | 500                            | 250                       | 200              | 100                   | 500.00         |               |              |  |               |                           |                  |              |        |                                |          |                       |               |                       |          |                       |                |
| Design  | 200          | 100  | 100                            | 50                        | 130              | 65                    |                |               |              |  |               |                           |                  |              |        |                                |          |                       |               |                       |          |                       |                |
| Plant   | 200          | 100  | 300                            | 150                       | 160              | 80                    |                |               |              |  |               |                           |                  |              |        |                                |          |                       |               |                       |          |                       |                |
| Reissue   | 300          | 150  | 500                            | 250                       | 600              | 300                   |                |               |              |  |               |                           |                  |              |        |                                |          |                       |               |                       |          |                       |                |
| Provisional   | 200          | 100  | 0                              | 0                         | 0                | 0                     |                |               |              |  |               |                           |                  |              |        |                                |          |                       |               |                       |          |                       |                |
| <b>2. EXCESS CLAIM FEES</b>   |              |  |                                |                           |                  |                       |                |               |              |  |               |                           |                  |              |        |                                |          |                       |               |                       |          |                       |                |
|   |              |  |                                |                           |                  |                       | Small Entity   |               |              |  |               |                           |                  |              |        |                                |          |                       |               |                       |          |                       |                |
| Fee Description   |              |  |                                |                           |                  |                       | Fee (\$)       |               |              |  |               |                           |                  |              |        |                                |          |                       |               |                       |          |                       |                |
| Each claim over 20 (including Reissues)   |              |  |                                |                           |                  |                       | 50             |               |              |  |               |                           |                  |              |        |                                |          |                       |               |                       |          |                       |                |
| Each independent claim over 3 (including Reissues)  |              |  |                                |                           |                  |                       | 200            |               |              |  |               |                           |                  |              |        |                                |          |                       |               |                       |          |                       |                |
| Multiple dependent claims   |              |  |                                |                           |                  |                       | 360            |               |              |  |               |                           |                  |              |        |                                |          |                       |               |                       |          |                       |                |
|   |              |  |                                |                           |                  |                       | 180            |               |              |  |               |                           |                  |              |        |                                |          |                       |               |                       |          |                       |                |
| <table border="0" style="width: 100%;"> <tr> <th>Total Claims</th> <th>Extra Claims</th> <th>Fee (\$)</th> <th>Fee Paid (\$)</th> <th colspan="2">Multiple Dependent Claims</th> </tr> <tr> <td>13</td> <td>- 20 =</td> <td>x</td> <td></td> <td>Fee (\$)</td> <td>Fee Paid (\$)</td> </tr> </table>  |              |  |                                |                           |                  |                       |                | Total Claims  | Extra Claims | Fee (\$)   | Fee Paid (\$) | Multiple Dependent Claims |                  | 13           | - 20 = | x                              |          | Fee (\$)              | Fee Paid (\$) |                       |          |                       |                |
| Total Claims  | Extra Claims | Fee (\$)   | Fee Paid (\$)                  | Multiple Dependent Claims |                  |                       |                |               |              |  |               |                           |                  |              |        |                                |          |                       |               |                       |          |                       |                |
| 13  | - 20 =       | x  |                                | Fee (\$)                  | Fee Paid (\$)    |                       |                |               |              |  |               |                           |                  |              |        |                                |          |                       |               |                       |          |                       |                |
| <table border="0" style="width: 100%;"> <tr> <th>Indep. Claims</th> <th>Extra Claims</th> <th>Fee (\$)</th> <th>Fee Paid (\$)</th> </tr> <tr> <td>4</td> <td>- 3 =</td> <td>1 x 100.00 =</td> <td>100.00</td> </tr> </table>  |              |  |                                |                           |                  |                       |                | Indep. Claims | Extra Claims | Fee (\$)   | Fee Paid (\$) | 4                         | - 3 =            | 1 x 100.00 = | 100.00 |                                |          |                       |               |                       |          |                       |                |
| Indep. Claims   | Extra Claims | Fee (\$)   | Fee Paid (\$)                  |                           |                  |                       |                |               |              |  |               |                           |                  |              |        |                                |          |                       |               |                       |          |                       |                |
| 4   | - 3 =        | 1 x 100.00 =                                     | 100.00                         |                           |                  |                       |                |               |              |  |               |                           |                  |              |        |                                |          |                       |               |                       |          |                       |                |
| <b>3. APPLICATION SIZE FEE</b>  |              |  |                                |                           |                  |                       |                |               |              |  |               |                           |                  |              |        |                                |          |                       |               |                       |          |                       |                |
| If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).   |              |  |                                |                           |                  |                       |                |               |              |  |               |                           |                  |              |        |                                |          |                       |               |                       |          |                       |                |
| <table border="0" style="width: 100%;"> <tr> <th>Total Sheets</th> <th>Extra Sheets</th> <th>Number of each additional 50 or fraction thereof</th> <th>Fee (\$)</th> <th>Fee Paid (\$)</th> </tr> <tr> <td>22</td> <td>- 100 =</td> <td>150</td> <td>(round up to a whole number) x</td> <td></td> </tr> </table>   |              |  |                                |                           |                  |                       |                | Total Sheets  | Extra Sheets | Number of each additional 50 or fraction thereof | Fee (\$)      | Fee Paid (\$)             | 22               | - 100 =      | 150    | (round up to a whole number) x |          |                       |               |                       |          |                       |                |
| Total Sheets  | Extra Sheets | Number of each additional 50 or fraction thereof | Fee (\$)                       | Fee Paid (\$)             |                  |                       |                |               |              |  |               |                           |                  |              |        |                                |          |                       |               |                       |          |                       |                |
| 22  | - 100 =      | 150  | (round up to a whole number) x |                           |                  |                       |                |               |              |  |               |                           |                  |              |        |                                |          |                       |               |                       |          |                       |                |
| <b>4. OTHER FEE(S)</b>  |              |  |                                |                           |                  |                       |                |               |              |  |               |                           |                  |              |        |                                |          |                       |               |                       |          |                       |                |
| Non-English Specification, \$130 fee (no small entity discount)   |              |  |                                |                           |                  |                       | Fees Paid (\$) |               |              |  |               |                           |                  |              |        |                                |          |                       |               |                       |          |                       |                |
| Other (e.g., late filing surcharge):  |              |  |                                |                           |                  |                       |                |               |              |  |               |                           |                  |              |        |                                |          |                       |               |                       |          |                       |                |
| <b>SUBMITTED BY</b>   |              |  |                                |                           |                  |                       |                |               |              |  |               |                           |                  |              |        |                                |          |                       |               |                       |          |                       |                |
| Signature   |              | Registration No.                                 |                                | Telephone                 |                  |                       |                |               |              |  |               |                           |                  |              |        |                                |          |                       |               |                       |          |                       |                |
|    |              | 52,361   |                                | (206) 262-8900            |                  |                       |                |               |              |  |               |                           |                  |              |        |                                |          |                       |               |                       |          |                       |                |
| Name (Print/Type)   |              | Attorney/Agent                                   |                                | Date                      |                  |                       |                |               |              |  |               |                           |                  |              |        |                                |          |                       |               |                       |          |                       |                |
| Jamie L. Wiegand  |              |  |                                | June 30, 2005             |                  |                       |                |               |              |  |               |                           |                  |              |        |                                |          |                       |               |                       |          |                       |                |

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## MEMORANDUM

|      |   |
|------|---|
| TO   | Mimi Muscat/Accounting  |
| FROM | Lori M. Clark  |
| DATE | June 30, 2005   |
| RE   | Postage Usage Logs - Seattle Office   |

Attached are postage usage logs for the Seattle Office for 6/27 - 30/05.

LMC  
Attachments

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Available  
\$455.34

POSTAGE LOG/SEATTLE OFFICE

| DATE    | CLIENT/MATTER NO. or NAME | AMOUNT               | USER NAME |
|---------|---------------------------|----------------------|-----------|
| 6/27/05 | 20165/3200377-USD         | .37                  | ATR       |
|         | 00500/800966-000          | .60                  | ATR       |
|         | 20171/9420171-000         | <del>1.20</del> 1.20 | ATR       |
|         | 20157/9420157-000         | .60                  | ATR       |
|         | 02637/8000528-000         | .60                  | ATR       |
|         | 20394/9420394-000         | .60                  | ATR       |
|         | 09386/9409386-000         | 1.75                 | ATR       |
|         | 03863/800F613-000         | .60                  | ATR       |
|         | 04171/9404171-000         | .60                  | ATR       |
|         | 03652/800F250-000         | 1.06                 | ATR       |
|         | 00156/7001314-000         | 1.29                 | ATR       |
|         | 08226/0202584-USD         | .60                  | ATR       |
|         | 20418/9420418-000         | .80                  | ATR       |
|         | 20467/9420467-000         | .85                  | ATR       |

Page Total = \$11.52

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POSTAGE LOG/SEATTLE OFFICE

| DATE    | CLIENT/MATTER NO. or NAME | AMOUNT | USER NAME |
|---------|---------------------------|--------|-----------|
| 6/29/05 | 10628/9600628-000         | .37    | ATR       |
|         | 19153/9609153-000         | .37    | ATR       |
|         | 08211/1200663-451         | .83    | ATR       |
|         | 08211/0200652-452         | .60    | ATR       |
|         | 08211/0200254-450         | .49    | ATR       |
|         | 08211/0200225-450         | .83    | ATR       |
|         | 04280/1201644-451         | 1.06   | ATR       |
|         | 04280/1201644-450         | 1.06   | ATR       |
|         | 08223/9408223-000         | 2.21   | ATR       |
|         | 08223/9408223-000         | 2.21   | ATR       |
|         | 11 11                     | 2.44   | ATR       |
|         | 2-0343/8201361-000        | .60    | ATR       |
|         | 08211/0202774-450         | 2.21   | ATR       |

6/30/05

20530/9420530-000

20535/9420535-000

.37

705

.37

705

Page Total = 16.02

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POSTAGE LOG/SEATTLE OFFICE

| DATE    | CLIENT/MATTER NO. or NAME | AMOUNT | USER NAME |
|---------|---------------------------|--------|-----------|
| 6/30/05 | 08204/9408204-000         | .37    | ATL       |
|         | V0044/9400062000          | .37    | ATL       |
|         | 19153/9609153-000         | .37    | ATL       |
|         | 10628/9600628-000         | .37    | ATL       |
|         | 08223/9408223-000         | 1.52   | ATL       |
|         | 08226/9408226-000         | .83    | ATL       |
|         | 20533/9420533-000         | .37    | ATL       |
|         | 20530/9420530-000         | .60    | ATL       |
|         | 20343/1202359-0.52        | 13.05  | ATL       |
|         | 08223/9408223-000         | 1.52   | ATL       |
|         | " "                       | 1.75   | ATL       |
|         | " "                       | 1.52   | ATL       |
|         | 20224/1201573-0.51        | 13.05  | ATL       |
|         | 08223/1200335-0.53        | 13.05  | ATL       |

Page Total = \$50.17

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POSTAGE LOG/SEATTLE OFFICE

| DATE | CLIENT/MATTER NO. or NAME | AMOUNT | USER NAME |
|------|---------------------------|--------|-----------|
| 6/30 | 08204/1200312-US1         | .83    | AR        |
|      | 08211/0200248-US0         | .83    | AR        |
|      | 20224/1201513-US1         | .60    | AR        |
|      | 20343/2202359-ERO         | 1.60   | AR        |
|      |                           |        |           |
|      |                           |        |           |
|      |                           |        |           |
|      |                           |        |           |
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Weekly Total = \$152.66

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